NEDH

CORP.

1986

ANNUAL REPORT

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REPORT OF MANAGEMENT

Colby Hewitt Jr., chairman (left), and Laurens MacLure, president.

Our 1986 fiscal year opened on two rather diverse themes: first, the Deaconess Hospital was ready to celebrate its 90th year of service to the community at large and could look back on a long, distinguished record; second, the Deaconess and the entire hospital industry in Massachusetts was entering a new, challenging, and uncertain reimbursement framework for Medicare patients known as the Prospective Payment System. At year end we can report that 1986 was a very good year financially, and this enhanced the underlying feeling of pride and excitement associated with our 90th birthday.

We are pleased to report that the financial results for NEDH Corp. and its subsidiaries for fiscal 1986 were very gratifying and exceeded our budgetary targets. Total net revenues—after adjusting for free care, uncollectables, and contractuals—amounted to $141,731,387. Expenses were $135,544,242, leaving an excess of revenues over expenses of $6,187,145. Part of our financial success this year can be attributed to higher payments linked to the growing intensity of care at the Deaconess, a reflection of the acutely ill patients typically treated at the hospital. In addition, our improved results were enhanced by the successful efforts by management and our medical staff in closely monitoring and controlling expenditures, adjusting staffing levels to the demand for beds, and exercising great care in the ordering of tests and services. This was done without any compromise in the quality of care rendered to our patients. As we look ahead, the ability to adjust expense levels to demand for services will be necessary if we are to prosper.

Thus, our first year under the Medicare Prospective Payment System turned out to be successful. However, we must continue to watch costs since inflation in hospital expenses may well exceed annual adjustments in reimbursement levels in the years ahead. Moreover, the reimbursement system in Massachusetts under Chapters 372 and 574 will be reviewed and revised during fiscal 1987.

Finally, the trend toward managed care systems, whereby patient flows are directed by health maintenance organizations and preferred provider organizations, clearly suggests that only efficient, well managed hospitals will prosper.

In statistical terms, patient discharges increased by almost two percent and average length of stay decreased by almost one day. These are healthy trends and indicate increasing efficiency. On the other hand, receivables increased by $8,402,722, or 37.6 percent. This reflects the fact that third parties (especially Medicare) have stretched their reimbursement schedules. We are concerned, and are taking steps to reverse this trend.

Among our efforts to contain costs and improve efficiency, as encouraged by state and federal reimbursement programs, we undertook two new initiatives last year that are worthy of mention. We appointed a preadmission coordinator to assist our medical staff in scheduling patient tests, consultations, and evaluations prior to admission, thereby avoiding delays and last-minute cancellations. We also started a "Guest Quarters" or bed-and-breakfast pilot program whereby patients can come to us the night before scheduled surgery or an outpatient procedure, stay in a low-cost housing unit on campus, and be admitted to the hospital early the next day.

During the year several major renovation programs were completed. The Deaconess opened the first critical care unit in Massachusetts in 1956, and in 1986 we opened a new six-bed Medical Intensive Care Unit on Baker 5. With this new unit we now have 31 intensive care beds. As a referral hospital we are continuing to see increasing numbers of patients with very complex problems who require the care available in these highly specialized units. We also have totally renovated our booking and admitting areas as well as our coffee shop. With these renovations and that of the main lobby, finished last year, we believe patients and visitors receive a visual impression upon entering our hospital that is consistent with the image of quality care we strive to provide.

In January, our Long Range Planning Committee presented a Master Facilities Plan designed to meet the hospital's clinical, academic, and support service needs over the next 20 years. The recommendations call for a new patient care building to be located on the current site of Harris Hall. The new construction will contain replacement beds for those now in Palmer and Baker, new operating rooms, new diagnostic radiology facilities, and space for much needed expansion of clinical support services. In addition, the plan recommends the development of expanded outpatient facilities, space for additional medical staff offices, the investigation of an expanded psychiatric service, and the need for additional research space. Since the presentation of the Master Facilities Plan, management has undertaken a financial feasibility study designed to determine how much money the hospital can afford to spend in the first phase of implementation of the plan and how the project might best be financed.

In evaluating various options available to meet these needs, the report questioned whether the School of Nursing was the best use for Kennedy Hall. In response, the hospital's trustees appointed a committee to examine the issues involved. The committee reviewed the many positive contributions of the school to the hospital and noted trends of declining enrollment, the uncertainty of continued future reimbursement, and changing views regarding appropriate educational preparation for nursing careers. The hospital's future space needs also were evaluated. The final decision, which was undoubtedly the most difficult made by the board in recent years, concluded that when everything was considered, the school should be phased out by 1989 and Kennedy Hall turned over to the hospital for other uses. We regret the necessity of this decision and always will be proud of the school's record of excellence. However, the realities of today's health care environment require that we make the changes necessary to meet the hospital's priority goals.

Our Department of Medicine, under the leadership of Robert C. Moellering Jr., M.D., achieved a major goal on September 1 when it was accorded full appointing status by Harvard Medical School. This is a major achievement, one we have been working toward for five years, and puts our Department of Medicine on an equal footing with those at Harvard's other principal teaching hospitals.

Our research programs continue to grow at an encouraging rate, despite a very competitive environment for research grants. At year end, the hospital had been awarded more than $13 million in federal and private grants. To meet short-term needs for laboratory space, we leased 21,000 square feet off campus and are converting it for use as research space.

Since its founding 90 years ago, the Deaconess Hospital has been known for many things—excellence in specialties like cancer, diabetes, and heart disease; dedicated physicians and surgeons; and, of course, excellence in patient care. We also have been known as a warm, friendly, caring hospital where every employee is concerned about our patients' well-being. Thus, the occasion of our 90th birthday was used to rededicate our entire staff to a heightened awareness of the importance of "guest relations," and we have emphasized our commitment to this tradition throughout this anniversary year.

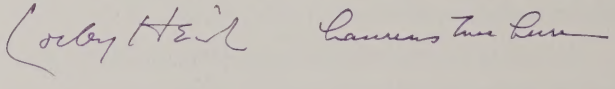
During the year there were several changes in management that deserve mention. Judith R. Miller, R.N., returned to the Deaconess to become associate director for Nursing. Paul P. Somoza was appointed associate director for Planning and Marketing, and Dean L. Manheimer (who is also a returnee) was appointed director of Human Resources. Our long-time associate director Peter Campisano retired after 20 years of service. John L. Rowbotham, M.D., retired as president of the Medical Staff and from active practice after 31 years at our hospital.

At last year's annual meeting Marvin G. Schorr stepped down after having served five years as chairman, but we are pleased to add that Marvin will be continuing as a director. Colby Hewitt Jr. was elected chairman in his place. Joining the board were R. Gregg Stone and Harold Hestnes.

It is with great sadness that we report the death during the year of Dorothy B. Seccomb who had served as a trustee and as a corporation member of the hospital for many years. She was a founding member of the Friends of the Deaconess and had worked for our hospital over many years with loyalty and dedication. We will miss her very much.

We can be proud of these achievements and of those of our past 90 years. But these accomplishments would not have been possible without the effort and support of our employees, medical and nursing staffs, trustees, corporation members, volunteers, and Friends. You all have played a vital role in shaping the Deaconess today. And you will play a more important role in the years ahead.

Many thanks for your continuing support.



Colby Hewitt Jr.
Chairman

Laurens MacLure
President

MEDICAL STAFF REPORT

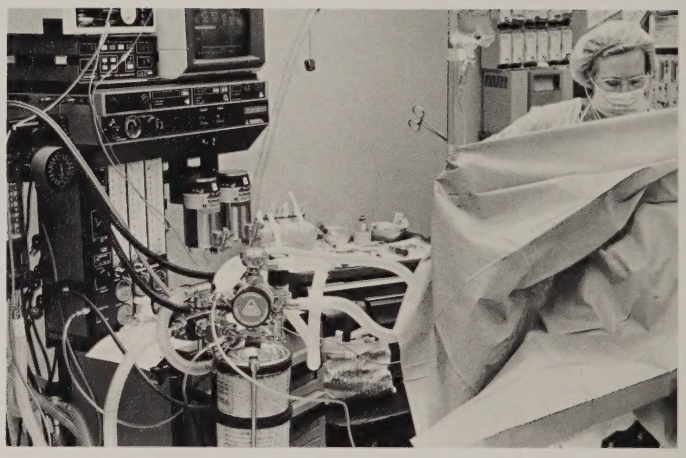
On September 1 the Department of Medicine became a full, free-standing academic department with appointing status at Harvard Medical School, joining the Department of Surgery which has had full appointing status at the Deaconess since 1973. This achievement reflects highly on the leadership of Robert C. Moellering, M.D., department chairman, and the clinical, research, and academic accomplishments of the department's members. Along with the new status will come an increased role for the department to play in the education of Harvard Medical School students.

During the fiscal year, Jerome Groopman, M.D., was named chief of a combined hematology/oncology section in the Department of Medicine. In Surgery, Jonathan Niloff, M.D., joined the staff as chief of gynecology and Henry Schmidek, M.D., as chief of neurosurgery. Edna S. Hamilton, M.D., joined the Department of Radiology as chief of cardiovascular radiology, and Robert G.L. Lee, M.D., was named chief of magnetic resonance imaging.

The creation of a new section for liver transplantation within the Department of Surgery indicates the growing importance of this procedure and the maturing of the Deaconess program. Led by Roger Jenkins, M.D., the section is the most active among the four institutional members of the Boston Center for Liver Transplantation and is working toward a goal of performing one procedure per week.

Development of a pancreas transplantation program, approved in 1985, has slowed because recent data from existing programs indicate less benefit than was previously anticipated for whole-organ or segmental grafts in patients with existing diabetic complications. This effort, headed by Anthony P. Monaco, M.D., and Richard Rohrer, M.D., may investigate simultaneous pancreas and kidney transplants in patients with few diabetic complications and will continue to explore islet cell transplantation.

The Deaconess continues to be one of the leading institutions in Boston and across the country for the treatment of patients with AIDS and related disorders. A new outpatient facility, located in Harris Hall and directed by J. Davis Allan, M.D., brings together the resources of the infectious disease, hematology/oncology, and pulmonary medicine sections to provide patient care and conduct clinical trials of experimental drugs.

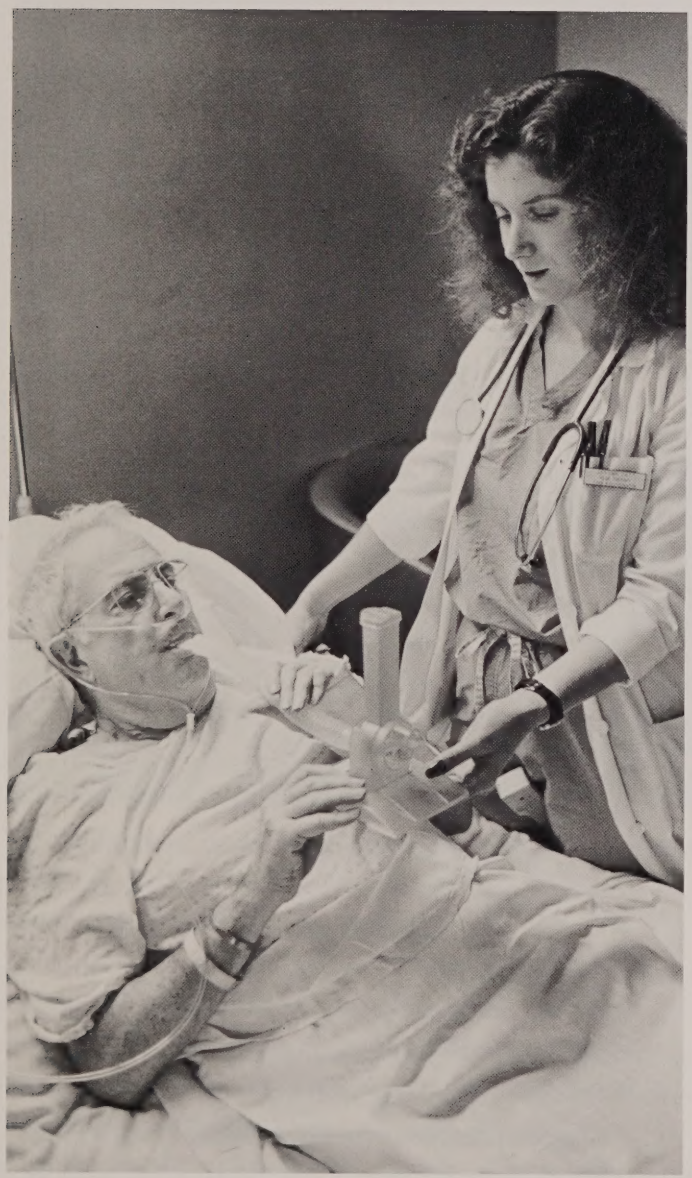


Continuing its efforts to improve patient safety, the Department of Anaesthesia has installed state-of-the-art monitoring equipment in all operating rooms.

The Department of Anaesthesia has continued its efforts to improve patient safety in the operating suite by adding mass spectrometry, which provides moment-to-moment monitoring of patient status. The number of invasive techniques used to stabilize anesthesia has increased. The department also has launched a major cost containment endeavor, carefully evaluating the use of all medications and supplies.

A new method of dissolving gallstones with methyl tertiary butyl ether was introduced as part of a joint program among the Departments of Radiology, Surgery, and Medicine. The technique involves injecting the drug through a catheter placed into the common bile duct or the gall bladder; it is intended as an addition to other methods of removing gallstones without major surgery developed by the Department of Radiology.

Another interdepartmental program between Radiology and Surgery combines intraoperative ultrasound with cryosurgery to locate and destroy metastatic liver tumors. Interdepartmental cancer treatment efforts being developed by Surgery and Medicine include clinics in gastrointestinal and gynecologic oncology.



A pulmonary section research study, published in the *New England Journal of Medicine,* demonstrated that limiting respiratory therapy services to seriously ill patients both improves quality of care and reduces costs.

Paola DeGirolami, M.D., director of the microbiology lab, reviews blood samples with Pathology staff members.

The Joint Center for Magnetic Resonance Imaging (MRI)—a consortium of the Deaconess, Beth Israel Hospital, Brigham and Women's Hospital, The Children's Hospital, and Dana-Farber Cancer Institute—received permission from the Massachusetts Department of Public Health to purchase a second MRI unit, which will be installed at Brigham and Women's Hospital. A request for a third unit, located at the Deaconess, has been filed. Because installation of the first unit at Beth Israel has been delayed, a temporary unit will be installed at the Deaconess to begin operating in January 1987.

Chairman of Radiology Melvin Clouse, M.D., demonstrates how a catheter can be inserted into the gallbladder. Several techniques for removing gallstones without surgery have been developed at the Deaconess.

The Deaconess division of the Joint Center for Radiation Therapy (JCRT) has begun several collaborative programs with the staff's hematology/oncology and surgical oncology sections. Hyperthermia, the use of heat to increase the effectiveness of radiation and chemotherapy, shows promise for the treatment of patients with recurrent superficial tumors. Studies will begin next year of radiation sensitizers, drugs that make the body more sensitive to the effects of radiation.

Several projects underway at other JCRT institutions soon may be available to Deaconess patients. These include radioactive implants to treat inoperable brain tumors, and small field irradiation, a technique producing a localized dose of very intense radiation. This technique is useful in treating arteriovenous malformations (large, misshapen blood vessels within the brain), and the JCRT is the first center in the country to utilize a linear accellerator rather than particle machines for the procedure.

Research funding again increased at the Deaconess, from $12,284,000 in July, 1985 to $13,072,000 in June, 1986. More than $31 million in grant and contract applications to government and industrial sources is pending. Thirty percent of current funding is from industrial sources and more than 170 research protocols are active.

The Harvard AIDS Treatment Evaluation Group, which includes the Deaconess research team headed by Jerome E. Groopman, M.D., was chosen by the National Institute of Allergy and Infectious Disease as one of 14 sites around the country to test experimental AIDS treatment drugs.

Groopman and his colleagues continue to make important contributions toward the understanding of AIDS, including identification of proteins in the AIDS virus, studies of the development of B-cell lymphomas in AIDS patients, and progress in the development of a genetically-engineered prototype vaccine. The pulmonary and infectious disease sections are investigating how the AIDS virus infects lung macrophages, immune system cells that may serve as a reservoir of the virus in the body.

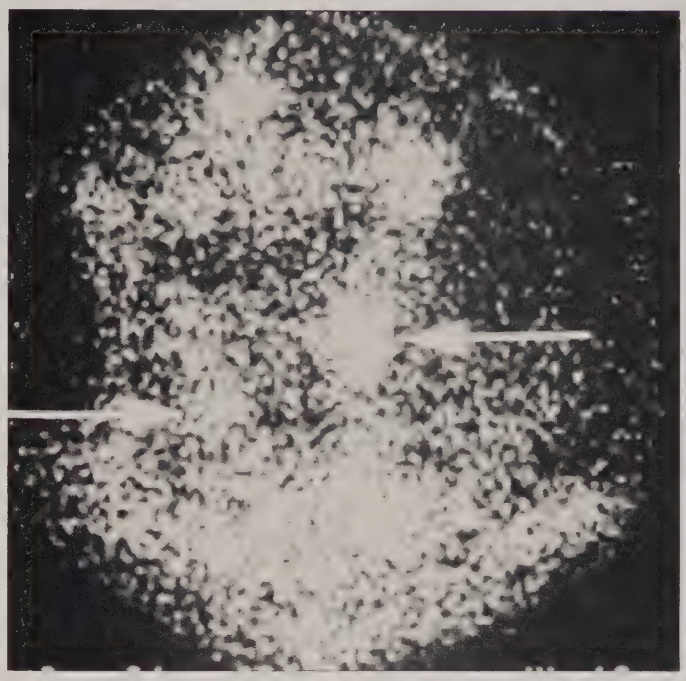
Another pulmonary section study, headed by Joseph Zibrak, M.D., demonstrated that limiting the use of respiratory therapy services to seriously ill patients could retain overall high-quality patient care while reducing costs.

Robert S. Lees, M.D., chief of peripheral vascular disease, has developed a method of detecting areas of asymptomatic atherosclerosis by means of radiolabeled low-density lipoprotein, the substance that carries cholesterol through the bloodstream and deposits it in the arteries. Lees and his group also have demonstrated the effectiveness of mevinolin, a powerful new drug for lowering blood cholesterol.

Cancer research in the Departments of Medicine and Surgery involves fighting tumors using biologic agents such as interferon and interleukin. A major research effort in the biology of colorectal cancer, headed by Glenn Steele, M.D., chairman of the Department of Surgery, has been established at the Shields Warren Radiation Lab.

During the year the Department of Surgery conducted a major review of its residency program, which operates in conjunction with the Cambridge, Faulkner, Mount Auburn, and Manchester (New Hampshire) Veteran's Administration Hospitals. New systems for evaluating residents were introduced and the administration of the entire program has been streamlined. The fellowship program in vascular surgery received full approval from the American Board of Surgery.

Other changes to teaching programs include the addition of fellowships in general internal medicine and gastroenterology in the Department of Medicine, and an increase in the number of anesthesia residents rotating to the Deaconess from Brigham and Women's Hospital.



A new imaging technique, developed by Robert S. Lees, M.D., chief of peripheral vascular disease, can detect areas of atherosclerosis (arrows) before symptoms occur.

Under new Medicare regulations, it is more important than ever for physicians to keep patient records up to date.

Albert Bothe Jr., M.D., associate chairman of the Department of Surgery, was named president-elect of the American Society for Parenteral and Enteral Nutrition. Albert Sheffer, M.D., chief of allergy, became president-elect of the American Academy of Allergy and Immunology, and Ellison C. Pierce, M.D., chairman of Anaesthesia, was named president of the Anesthesia Patient Safety Foundation and a member of the panel on risk management of the Joint Commission on Accreditation of Hospitals.

Other staff members honored by their colleagues include Jack Hawiger, M.D., Ph.D., chief of experimental medicine, who served as chairman of the Gordon Research Conference on Hemostasis; Steven R. Goldring, M.D., chief of rheumatology, who was corecipient of the Carol Nachman prize; and Robert Kane, M.D., radiologist, recipient of the first Roscoe E. Miller award from the Society of Gastrointestinal Radiologists.

Robert C. Moellering, M.D., was appointed editor-in-chief of *Infectious Disease Clinics of North America*. Senior medical resident Christopher Clyne, M.D., received first place in the associates competition of the American College of Physicians; and pathology resident Jeffrey Medeiros, M.D., received the award for the best resident paper at the annual meeting of the American Society of Clinical Pathologists.

New members of the Department of Medicine include J. Jacques Carter, M.D., internal medicine; Barbara Fallon, M.D., internal medicine/oncology; Roy Freeman, M.D., neurology; Dean Markham Jr., M.D., infectious disease; William Nessa, M.D., Carl Rasmussen, M.D., and Richard Ress, M.D., cardiology; Arthur Sytkowski, M.D., hematology; Thomas Peebles, M.D., and Robert Wharton, M.D., pediatrics; and Paula Pinkston, M.D., pulmonary.

In the Department of Surgery, staff appointments include James Bayley, M.D., and Thomas Cochran, M.D., orthopedics; Thomas Dodson, M.D., general surgery and liver transplantation; Clifford Kass, M.D., urology; Craig Olsen, M.D., and John Waciuma, M.D., cardiothoracic surgery; Henry Sears, M.D., and Thanjavur Ravikumar, M.D., surgical oncology; and Carolyn Shaak, gynecology.

Paul Busse, M.D., Ph.D., joined the Joint Center for Radiation Therapy, where he will oversee the intraoperative radiotherapy program. Frank Greco, M.D., joined the Pathology Department, and new staff members in Anaesthesia are Kimball Atwood IV, M.D., Michael Smalkey, M.D., and Doris Stickler, M.D.

Allan Brett, M.D., general medicine (front left), and Paul Hans, M.D., psychiatry (front right), lead a discussion group of first-year medical students in Harvard's New Pathway program.

HIGHLIGHTS OF 1986

Department of Nursing reorganized

In an effort toward greater efficiency and added accountability within the largest single department at the Deaconess, the Department of Nursing Service was reorganized into a decentralized Department of Nursing. Seven directors now report to the associate director for Nursing. The reorganization also brought all of the hospital's nurses under the Department of Nursing.

AIDS education for employees

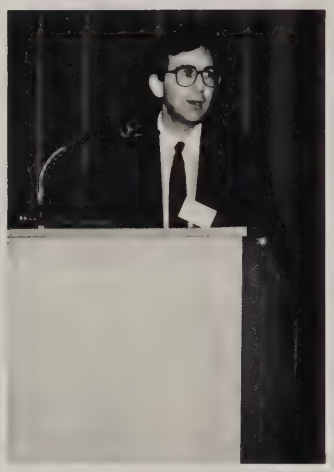
As part of its program to answer employees' concerns about caring for patients with AIDS, the hospital began a series of "Employee Grand Rounds." At the hospital-wide meetings, employees heard the latest scientific information about AIDS and, in an open forum, had the opportunity to ask questions of medical, nursing, and administrative staff members.

Other aspects of the continuing program include talks and workshops in individual departments and an employee support group. This educational program received a Gold Touchstone award from the American Society for Hospital Marketing and Public Relations, a division of the American Hospital Association.

New blood donor room

The new Deaconess Blood Bank donor room offers a more pleasant atmosphere for the hospital's blood donors. The area features natural light, more chairs for regular and pheresis donors, and private space for predonation interviews. The Blood Bank also has computerized all donor records.

Both pheresis (center) and regular blood donors enjoy the spaciousness of the Blood Bank's new donor room.



Pulitzer Prize-winning author Paul Starr, Ph.D., discussed the American health care system at the 1986 annual meeting.

Program generates employee referrals

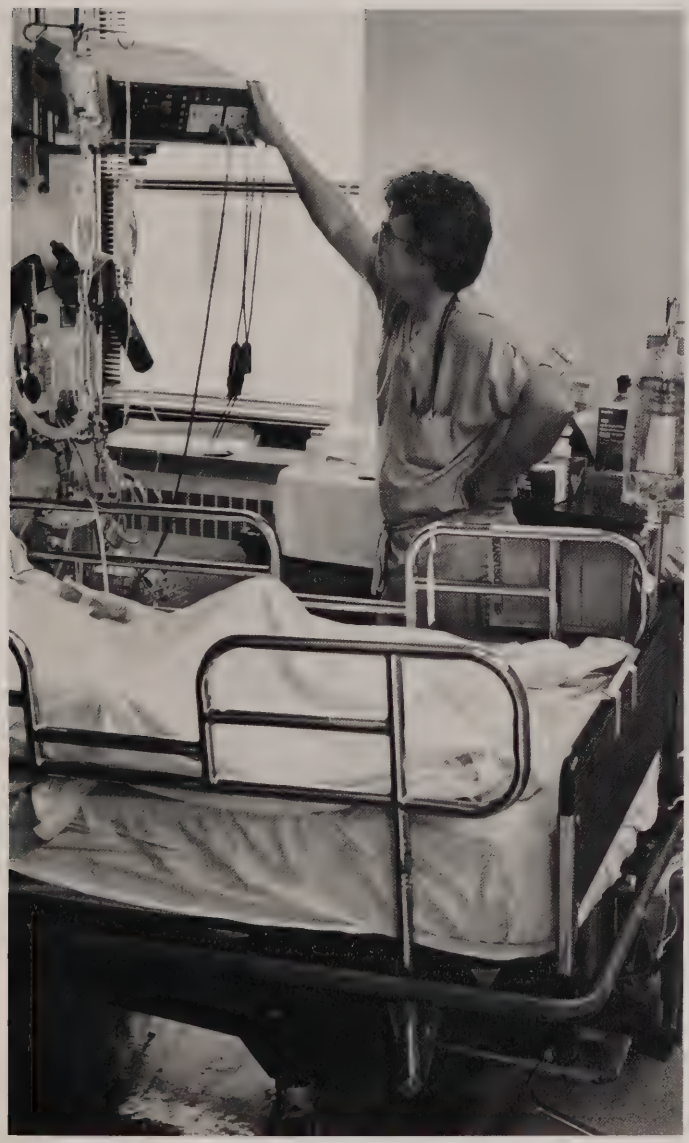
As a result of the extremely low unemployment rate in Massachusetts, businesses and institutions face an unusual challenge in recruiting new employees. The Human Resources Department met that challenge with an incentive program called DARE (Deaconess Awards Referring Employees). DARE encourages current employees to refer potential employees for jobs at the hospital by offering cash rewards for successful referrals for positions that are particularly difficult to fill. Six successful referrals were made during the program's first six months.

Starr speaks at annual meeting

Paul Starr, Ph.D., a Princeton professor of sociology and author of the Pulitzer Prize-winning book *The Social Transformation of American Medicine,* spoke on major changes in the American health care system at the NEDH Corp. annual meeting in January. A highlight of the meeting program was the first showing of a videotape on the hospital's 90-year history.

90th anniversary celebration

The formal celebration of the Deaconess's 90th anniversary began February 5—the date of the hospital's founding—with a hospital-wide birthday party and installation of an anniversary banner on the Farr building. Other aspects of the celebration included the sale of Deaconess ties, scarves, mugs, and t-shirts in the gift shop; showings of the historical videotape; displays of photographs illustrating the hospital's history and employees through the years; a contest based on important "firsts" at the hospital; and an employee picnic.



Each room in the Medical Intensive Care Unit is equipped with sophisticated monitoring equipment.

Coffee Shop becomes Cafe 90

The Coffee Shop revamped both its physical surroundings and its menu, emerging as "Cafe 90," named in honor of the 90th anniversary. The renovation included a brighter color scheme, new floors, and counters with special tables for customers in wheelchairs. The revised menu retained some old favorites and added lighter meals for health-conscious customers.

Harvard students raise money for AIDS research

A student project by a Harvard senior grew into "The Festival of Life," a week-long program of benefit performances, meetings, and workshops to raise money for AIDS treatment and research. Singer Judy Collins, pianist Joan Kennedy, actresses Colleen Dewhurst and Nancy Marchand, and performer Joel Grey were among the many celebrities who participated in the festival. More than $16,000 was raised for Deaconess research and for the AIDS Action Committee in Boston.

MICU opens on Baker 5

Providing critical care for patients with acute, non-surgical illnesses, the Medical Intensive Care Unit (MICU) opened on Baker 5 in March. The unit was designed for patient comfort and privacy and features six private rooms with monitoring equipment, hookups for dialysis machines, and other special features. With the opening of the MICU, the existing Intensive Care Units on Farr 6 were devoted to caring for surgical patients.

Friends of the Deaconess

The Friends raised more than $100,000 for the hospital and School of Nursing during the year. In addition to their continuing projects such as the arts and crafts cart, Baker Roof Garden, and "Coffee and Conversation" program in the oncology unit, the Friends helped the hospital purchase video cassette recorders to be used for training and patient diversion. At the 1987 Annual Meeting, the Friends will present the hospital with $86,000 to renovate the ambulatory and outpatient care areas.

Entertainer Joel Grey was one of several celebrities participating in Harvard's Festival of Life, which raised funds for Deaconess AIDS research.

Farr 9 converts to vascular cluster

As part of a program to increase the efficiency of patient care, services for patients with vascular diseases were brought together in a new cluster unit on Farr 9. The unit combines the hospital's resources in medicine, surgery, nursing, podiatry, and physical therapy to meet the special needs of patients with diabetic foot problems and other vascular diseases.

New programs add to fundraising effort

The hospital's fundraising activities included a benefit performance by pianist George Feyer at the Copley Plaza in December and the second annual phonathon in April. Forty-five volunteers—including trustees, corporators, administrators, and medical and nursing staff members—helped to make the phonathon a success.

The Deaconess Associates Program, instituted this year, encouraged major donations of $500 or more to the annual appeal. One hundred twenty-two leadership givers joined the program, and their participation helped the appeal raise a record $290,000. The hospital's four major fundraising efforts—the annual appeal, corporate gifts, special purpose gifts, and bequests—produced a total of $1,678,000 for the year.

Farr 9 nurses receive special training in diabetic foot care as part of the unit's conversion to a vascular cluster.

Hospital barber Sam Marotta (left) receives an Award of Merit from Richard Lee, hospital director, at the Service Awards Dinner.

Program assists families of surgical patients

To alleviate the stresses of family members waiting for a patient in surgery, the Departments of Nursing and Volunteer Services instituted a surgical liaison program. Surgical liaison nurses, some of whom are volunteers, meet with family members waiting in the Farr lobby and regularly visit the surgical suite to check on patients' status. Their support helps ease the wait for patients' loved ones.

Volunteers

More than 300 volunteers of all ages gave 34,000 hours in 40 areas of the hospital during 1986. Retired nurses made an important contribution to the surgical liaison program; other new volunteer programs were assisting at the Information Desk, in Medical Records, and on nursing floors. Students from local colleges volunteer in the surgical metabolism, nutrition metabolism, and experimental medicine labs; and Army Reserve members volunteer in the Nursing and Pharmacy Departments. Volunteers provide a vital link between the hospital and the community at large.

Service Awards Dinner has anniversary theme

A total of 1,300 Deaconess employees with five or more years of service were eligible for the 31st Annual Service Awards Dinner, held at the Sheraton Boston Hotel in April. More than 600 attended the event, organized around a 90th anniversary theme; and nine employees received Awards of Merit for 25 or more years of service.

New waste disposal systems

The Building Services Department installed new systems and equipment for the handling and disposal of infectious and hazardous waste. The steam sterilizer destroys bacteria and viruses present in materials such as soiled bandages, dressings, and gloves. Another system improved the handling of used syringes and other sharp, potentially infectious implements. In addition to improving employee safety, the new equipment saved the hospital more than $100,000 per year.

School of Nursing associate director Judith Farias, R.N., gives graduate Michael Conti his Deaconess pin at the baccalaureate service.

The Deaconess tradition of compassionate, patient-centered care is reaffirmed through a formal guest relations program.

School of Nursing graduation

Forty-one graduates received diplomas at the New England Deaconess Hospital's 88th graduation exercises in May. Kitty Dukakis, wife of the Massachusetts governor, was the graduation speaker.

Renewed emphasis placed on guest relations

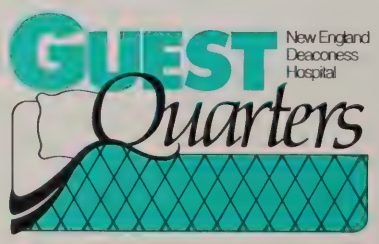
To maintain the hospital's tradition of friendly, patient-centered care, a program was initiated to evaluate each department's involvement in "guest relations"—contact with patients, visitors, and family members. The program will provide materials and training to help employees maintain good guest relations while they work to achieve the hospital's goals of increased efficiency and productivity.

Admitting area, process are remodeled

A totally rebuilt Admitting Department opened in September, featuring a larger, more welcoming patient waiting area and streamlined workspaces for employees. Along with the new physical surroundings, Admitting began programs to make the admission process simpler and reduce patients' length of stay, including preadmission lab tests for elective surgical patients.

Hospital offers Guest Quarters

To meet the needs of patients who wish to spend the night near the hospital before or after minor surgery or diagnostic testing, the Deaconess began offering "Guest Quarters" in September. The program provides low-cost accommodations and amenities for ambulatory patients in Audrey Kennedy Hall.



FINANCIAL AND STATISTICAL HIGHLIGHTS

NEDH CORP. AND SUBSIDIARIES
Consolidated Balance Sheets

September 28, 1986 and
September 29, 1985

$000

		FY 1986	FY 1985
ASSETS			
UNRESTRICTED FUNDS			
	Current Assets	$41,955	$30,889
	Trustee Designated Assets	19,664	14,017
	Property, Plant & Equipment (Net)	51,566	44,071
	Total	$113,185	$88,977
RESTRICTED FUNDS			
	Special Purpose Funds	$13,073	$11,452
	Endowment Funds	12,354	11,583
	Plant Replacement & Expansion Funds	692	224
	Total	$26,119	$23,259
	Total Assets	**$139,304**	**$112,236**
LIABILITIES			
UNRESTRICTED FUNDS			
	Current Liabilities	$33,310	$23,518
	Deferred Revenue	702	773
	Supplemental Retirement Benefits	1,470	1,291
	Long-Term Debt	22,746	15,121
	Fund Balances	54,957	48,274
	Total	$113,185	$88,977
RESTRICTED FUNDS			
	Fund Balances	$26,119	$23,259
	Total Liabilities and Fund Balances	**$139,304**	**$112,236**

COMPOSITION OF ASSETS 1986

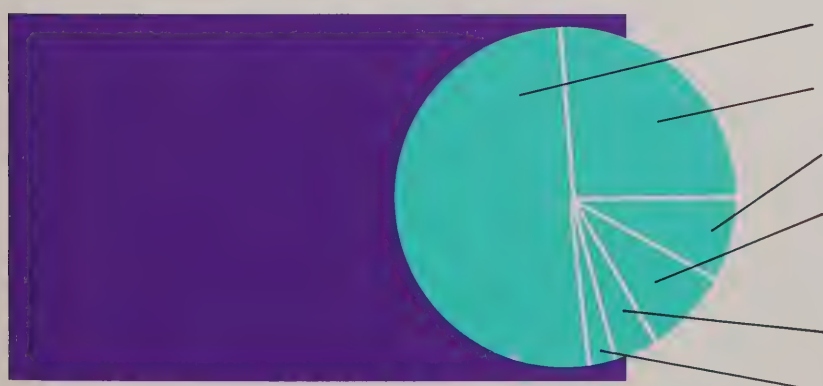
NEDH CORP. AND SUBSIDIARIES
Statement of Revenue and Expenses

For Fiscal Years Ended
September 28, 1986
and September 29, 1985

$000

	FY 1986	FY 1985
NET REVENUES		
Patient Care	$138,239	$118,609
Real Estate	1,256	1,165
Investments, etc.	2,063	1,798
Unrestricted Contributions	173	273
Total Net Revenues	**$141,731**	**$121,845**
OPERATING EXPENSES		
Patient Care	$134,518	$119,687
Real Estate	780	829
Other	246	152
Total Operating Expenses	**$135,544**	**$120,668**
Excess of Revenue Over Expenses	**$6,187**	**$1,177**

DISTRIBUTION OF 1986 OPERATING EXPENSES



($000)	% of Total	
$66,386	49.0	Salaries & Wages
$35,027	25.8	Energy Costs, Supplies, etc.
$10,953	8.1	Fringe Benefits
$9,881	7.3	Purchased Services and Rentals
$5,886	4.3	Depreciation
$5,150	3.8	Research
$2,261	1.7	Interest

Detailed, audited financial statements are available on request.

NEDH CORP. AND SUBSIDIARIES
Financial Highlights

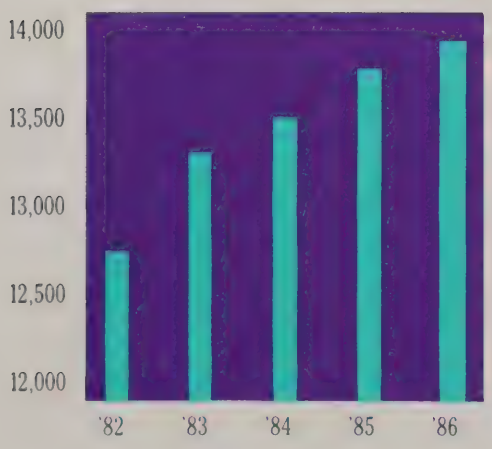
$000

	1986	1985	1984	1983	1982
Net Revenues	**$141,731**	$121,845	$116,141	$103,636	$97,617
Operating Expenses	**$135,544**	$120,668	$110,949	$100,796	$95,840
Excess of Revenue Over Expenses	**$ 6,187**	$ 1,177	$ 5,192	$ 2,840	$ 1,777
Accounts Receivable—Net	**$ 30,736**	$ 22,333	$ 18,311	$ 16,399	$13,980
Property, Plant & Equipment (Net)	**$ 51,566**	$ 44,071	$ 40,159	$ 38,863	$38,684
Long-Term Debt	**$ 22,746**	$ 15,121	$ 10,577	$ 11,078	$11,898
Total Unrestricted Assets	**$113,185**	$ 88,977	$ 75,225	$ 68,659	$63,802

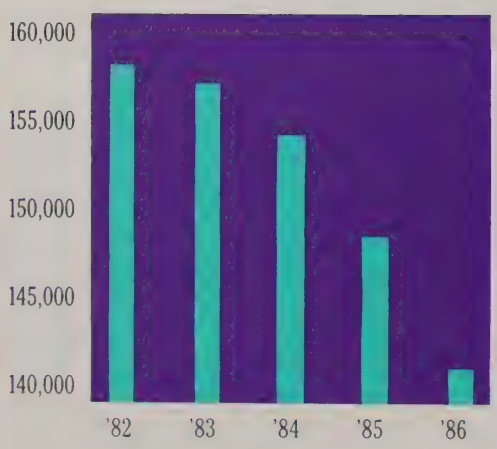
OPERATING STATISTICS

Fiscal Year 1986 Compared to Fiscal Year 1985	FY 1986	FY 1985
Occupancy	79.2%	83.6%
Admissions	13,916	13,727
Patient Days	140,960	148,749
Average Daily Census	387.3	408.6
Average Stay (Days)	10.1	10.9
Surgical Procedures	6,092	5,880
Surgical Minutes	1,290,661	1,189,000
Radiological Procedures	71,097	66,973
Radiation Treatments	21,683	18,558
Laboratory Units	43,858,692	41,017,667
Outpatient Visits	59,131	52,829

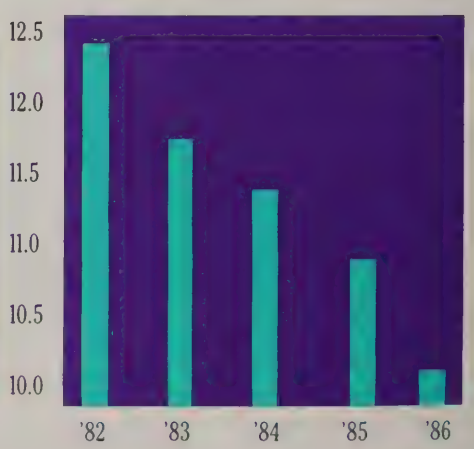
Admissions



Patient Days



Average Length of Stay (Days)



ABOUT THE DEACONESS

The New England Deaconess Hospital is a 489-bed specialty-referral, tertiary care facility, the third largest hospital in Boston. Its 15-building complex is located in the Longwood Medical Area near its teaching affiliate, the Harvard Medical School, and other health care institutions with which it shares several joint programs, research efforts, and staff.

The hospital serves approximately 14,000 inpatients each year and records more than 50,000 outpatient visits for a variety of medical and surgical needs. Traditionally known for its work in cancer, diabetes, heart disease, and kidney transplantation, the Deaconess has in recent years gained additional recognition for excellence in general medicine and nutritional support, and for its expanding organ transplantation program.

Patients are referred from all over the world to members of the hospital's medical and surgical staffs, composed of specialists from the Deaconess, the Joslin Diabetes Center, the Overholt Thoracic Clinic, and the Joint Center for Radiation Therapy.

The hospital prides itself on providing outstanding medical and surgical services, on the excellence of its medical and nursing staffs, and the talent and dedication of its 3,000 employees. The hospital is known as well for its teaching programs for young physicians, its School of Nursing, and other training programs in the allied health sciences.

Research conducted at the Deaconess includes basic science and clinical research in areas such as: hematology, immunology, infectious disease, nuclear medicine, nutritional metabolism, oncology, pathology, peripheral vascular disease, pulmonary medicine, radiation therapy, surgical metabolism, and transplantation.

While committed to teaching and research, the hospital's primary mission is patient care. At the Deaconess, the patient always comes first. Deaconess people strive to provide the best possible patient care, combining excellence in medical services with personalized, understanding, and attentive support.

This spirit has prevailed since 1896, when the hospital was founded by a group of deaconesses from the Methodist Church. Seeing a need for skilled and compassionate care of the sick and indigent people of Boston, the deaconesses opened a 14-bed hospital on Massachusetts Avenue. The finest physicians of the day were attracted by the institution's philosophy of patient care, and within 10 years, larger quarters were needed. The hospital moved to its present site in the Longwood area, opening a 50-bed hospital in 1907.

The primary goal of the hospital's founders remains a part of the Deaconess tradition—that caring for, and caring about, patients is our first priority. This philosophy is shared by all members of the Deaconess community: medical staff, nursing staff, employees, volunteers, trustees, corporators, auxilians, donors, and many other friends of the hospital.

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